

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: WHITES RESIDENTIAL TREATMENT INC (310659)
Address: 2811 W NORTH AVE, MILWAUKEE, WI 53208
License Status: REGULAR
Licensed/Certified/Registered 07/01/1998
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095823 **End Date:** 10/05/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009469 Served 11/07/2005

Deficiencies Cited
83.35(5)(c)

Subject Area
FROZEN AT 0 DEGREES F. OR BELOW

Compliance
Verified

Corrected

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